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## STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS AND MINING

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DIVISION OF OIL, GAS AND MINING

## ANNUAL REPORT OF MINING OPERATIONS

The informational requirements of this form are based on provisions of the Mined Land Reclamation Act, Title 40-8, Utah Code Annotated 1953, as amended, and the General Rules as promulgated under the Utah Minerals Regulatory Program. An operator conducting mining operations under a Notice of Intention must file an annual operations and progress report (FORM MR-AR) with the Division.

| I.  | Genera  | d Information  |  |
|-----|---|--|--|
|     | 1.  | Report Time Period: From (mo./yr.) 12-1-01 To (mo./yr.) 12-31-01   |  |
|     | 2.  | DOGM File Number (Mine No): / / 5740074 5/47/074   |  |
|     | 3.  | Mine Name: United 5/one  |  |
|     | 4.  | Mineral(s) Mined (or permitted to mine): 50 Face Stone   |  |
|     | 5.  | Type of mine   ✓ Surface Mine or   ☐ Underground Mine  |  |
|     | 6.  | Legal Description (Location of Lands Affected):  |  |
|     |   | $NE_{1/4}$ , $SE_{1/4}$ , $I/4$ , Section $I/4$ , Township $I/4/4$ , Range $I/4/4$ , R |  |
|     |   | 1/4,1/4,1/4, Section, Township, Range  |  |
|     |   | 1/4,1/4,1/4, Section, Township, Range  |  |
| 7.  | Name of Operator or Company: United Shore? Design |  |  |
|     | 8.  | Permanent Street Address: Soo W 59 N   |  |
|     |   | City, State, Zip: Dehesse Ut. 8402   |  |
|     |   | Phone: 435 - 738 - 2366 Fax: 435 - 738 - 2145  |  |
|     | 9.  | Company Representative (or designated operator):   |  |
|     |   | Name: Dustin Falley  |  |
|     |   | Title: Partne  |  |
|     |   | Business Address: Po Box 909   |  |
|     |   | City, State, Zip: Dulesie Utah 84021   |  |
|     |   | Phone: 435-738-2366 Fax: 435-738-2145  |  |
|     |   | Please check if any of the above information has changed since previous year.  |  |
| II. | Mining  | g and Reclamation  |  |
|     | 1.  | Was there any mine related activity during the past year? Yes □ No □   |  |
|     | 2.  | If no - what was the last year of activity? No Activity  |  |
|     | 3.  | If yes - how much ore or mineral was mined?  |  |

| 4.                               | additional surface disturbances that occurred during the past year.   |  |  |
|----------------------------------|---|--|--|
|                                  | NA-   |  |  |
|                                  |   |  |  |
| 5.                               | How much additional acreage was disturbed during the past year?   |  |  |
| 6.                               | How much acreage was reclaimed during the past year?  |  |  |
| 7.                               | Briefly describe the reclamation work performed during the past year. This description should include methods employed, and an evaluation of the results.           |  |  |
|                                  | NA -  |  |  |
|                                  |   |  |  |
| 8.                               | What is the total disturbed acreage of entire project at years end? aces  |  |  |
| 9.                               | Briefly summarize any mining and/or reclamation plans for the upcoming year.  |  |  |
|                                  | Susses Shore will be gatheral 3 semoved Asea will be sectained to Dogm Standards.   |  |  |
| NOTE:                            | Section III., "Additional Information" applies only to large mining operations.   |  |  |
| III. <u>Additional</u>           | Information - R647-4-121.2 and .3   |  |  |
| 1.                               | The operator shall include an updated map depicting surface disturbance and reclamation performed during the year, prepared in accordance with Rule R647-4-105.     |  |  |
| 2.                               | The operator shall keep and maintain timely records relating to his performance under the Act, and shall make these records available to the Division upon request. |  |  |
| IV. <u>Signature Requirement</u> |   |  |  |
| I here                           | by certify that the foregoing is true and correct.  |  |  |
|                                  | Name (Typed or Print):  |  |  |
|                                  | Title of Operator:  |  |  |
|                                  | Signature of Operator:  |  |  |
|                                  | Date: 2-7-07  |  |  |
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